

Clinical Supervisor Terms of Reference

1. Background

The Clinical Supervisor contract will continue on a part time basis under a revised title to better reflect the clinical and advisory focus of this position. The clinical Supervisor will report to the Shibogama Health Authority Health Director, work as a team with the Payahtakenemowin Program Coordinator, work as a mentor to the Payah Program Coordinator, work supervise with the Resource Team workers and oversee the outside mental health consultants as required by the community Health Directors.

Professional, ethical and work requirements as outlined in the Shibogama First Nations Council Personnel and Finance Policies will apply.

1. Objective:

To strengthen the clinical base of the community mental health programs in the Shibogama communities.

2. Activities:

The Clinical Supervisor shall in consultation with other Health Authority staff:

1. Support Community Resource Teams by:
 - a. Making regular visits to the communities for ongoing clinical supervisor and hands on training for community based program workers.
 - b. Promoting academic and life skills preparation for a career in the helping services.
 - c. Providing clinical supervision advisory support during monthly individual case teleconferences with community-based resource teams and on case management conference calls meetings of difficult and high risk clients. This includes support with client assessments, files, referrals and other paper work.
 - d. Providing direct clinical consultation and supervision on specific cases with the Resource Team Coordinator, key family members and Payahtakenemowin staff.
 - e. Providing support to the Resource Team Coordinator during community crisis.
 - f. Investigating appropriate approaches on family, group and individual counselling.
 - g. Providing orientation to the new RTCs and other health care professionals.
 - h. Providing Critical Incident Stress debriefing to all resource team workers after each traumatic incident.
 - i. Participating as trainer at the quarterly RT meetings.

2. Support Community Health Workers by:

- a. Providing in services on key mental health issues to the CHNs, CHRs, and Health Directors.
- b. Promoting community awareness on key mental health issues on the community radio stations.

3. Maintain Systems of Clinical Coordination by:

- a. a. Collecting, analyzing and sharing the mental health data from community Mental Health activities, incidents and trends.
 - i) facilitating crisis intervention strategies with the RTCs from this data
- b. Attending case conferences with regional agencies, such as Tikinagan Child and Family Services and NODIN.
- c. Promoting adherence to the follow-up plans, and tracking their implementation by the appropriate personnel.
- d. Assisting in the preparation of correspondence on patient care or progress for the proper resources, in necessary.
- e. Supervising on management of cases involving danger to children. Facilitate clear communication to referrals for child protection to child welfare agencies, and communication of investigation outcomes and follow-up plans to the appropriate community based and other agencies.
- f. Supervising the RTCs maintain a tracking system of high risk clients to prevent any gaps in services or unclear communication.
- g. Promoting the community based protocols as developed by Payahtakenemowin and the Resource Teams.

4. Monitor the Overall Training and Development of Resource Workers by:

- a. Case consultations, regular case by case teaching of mental health workers and child welfare issues, including conducting periodic joint client interviews for teaching purposes.
- b. Recommending appropriate training for the resource teams.
- c. Compiling relevant PCT components for self-directed learning by interested Resource team workers.

5. Maintain Community Liaisons by:

- a. Representing SFNC on mental health clinical issues with the hospital committees and outside agencies as requested.
- b. Liaising with the Tribal councils and PTOs and Nodin on mental health clinical issues.
- c. Liaising with other community helping groups (elders, youth, clergy, young parents, etc.) to promote social and mental health programs and networks.

6. Provide clinical supervision advice and support to the visiting professional mental health consultants/counsellors.

- a. Supervision (when needed).
- b. Promoting debriefing and professional development.
- c. Facilitating strategic workplans on crisis prevention, intervention and mental health promotion.

7. Provide mentorship to the Payahtakenemowin Program Coordinator.

- a. Providing monthly training on program development and management skills.

8. Initiate an evaluation of the Resource Teams by:

- a. Setting up community planning groups that will provide direction and input into the evaluation of the Resource Teams.

9. Advise on creating higher community visibility and credibility by:

- a. Promoting Shibogama First Nations Council documents, reports and successes
- b. Assisting Resource Teams with presentations at regional conferences or to other agencies.

10. Perform specific Administrative Duties such as:

- a. Attending management meetings with clinical management staff of other agencies
- b. Assuming Director duties during the absence of the Payahtakenemowin Program Coordinator